Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Common Values PAC 901 N Washington St, Suite 700 ADDRESS (number and street) (Check if address is changed) Alexandria 22314 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS tim@kochandhoos.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.commonvaluespac.com (Check if address is changed) DATE 03 2013 C00442368 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Timothy A. Koch Type or Print Name of Treasurer Timothy A. Koch [Electronically Filed] 05 03 2013 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

	EEC Ea	rm 1 (Pavisad 02/2000)	Page 2
		om 1 (Revised 02/2009) OMMITTEE	raye Z
		Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	nplete the candidate
Nam Cano	e of didate		
	didate / Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
		Corporation Wo Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	•
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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FEC Form 1 (Revised 02/2	009)	Page 3
Write or Type Committee Name	D.4.O.	
Common Values	PAC	
6. Name of Any Connected Orga	nization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hip PAC Sponsor
Barrasso Victory Commit	tee 	
90 Mailing Address	1 N Washington St Suite 700	
A	exandria VA 22314	
	CITY STATE	ZIP CODE
Relationship: Connected Or	ganization Affiliated Committee X Joint Fundraising Representative Lea	adership PAC Sponsor
 Custodian of Records: Identify books and records. 	by name, address (phone number optional) and position of the person in pos	ssession of committee
Timothy A. Ko		1
Full Name	1 N Washington St, Suite 700	
Mailing Address		
L		
LA	lexandria VA 22314	
Title or Position	CITY STATE	ZIP CODE
Treasurer		299 - 8571
Treasurer: List the name and ac any designated agent (e.g., assis	dress (phone number optional) of the treasurer of the committee; and the na tant treasurer).	me and address of
Full Name Timothy A. Koo	h	I
of Treasurer	1 N Washington St, Suite 700	
Mailing Address	THE WASHINGTON, CORE 700	
A	exandria VA 22314	
Title or Position		ZIP CODE
Treasurer	Telephone number 703	299 8571

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Full Name of		
Designated Agent		
Mailing Address	1	
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit boxes o Name of Bank, Deposi		
safety deposit boxes o Name of Bank, Deposi	r maintains funds. itory, etc.	
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FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

Page 5 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Sen. John Barrasso 6896 Casper Mountain Rd Mailing Address WY 82601 Casper **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number